

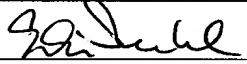


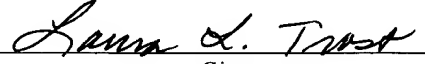
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	09/596,958
		Filing Date	June 20, 2000
		First Named Inventor	Kim et al.
		Group Art Unit	1638
		Examiner Name	A.Kubelik
Total Number of Pages in This Submission	4	Attorney Docket Number	19603/3286 (CRF D-2062B)

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply (\$_____) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request (\$_____) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement (\$_____) <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Notice to File Missing Parts/ Incomplete Application (\$_____) <input type="checkbox"/> A copy of the Notice to File Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition (\$_____) <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer (\$_____) <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (\$_____) (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input checked="" type="checkbox"/> A self-addressed, prepaid postcard for acknowledging receipt <input type="checkbox"/> Check in the amount of \$ _____ <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 14-1138 for the above identified docket number.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Edwin V. Merkel Nixon Peabody LLP Clinton Square, P.O. Box 31051 Rochester, New York 14603-1051 Telephone: (585) 263-1128 Fax: (585) 263-1600
Signature	 Registration No. 40,087
Date	September 12, 2005

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<input type="checkbox"/> transmitted by facsimile on the date shown below to the United States Patent and Trademark Office at (703) _____	
September 12, 2005 Date	 Signature Laura L. Trost Typed or printed name



PATENT
Docket No.: 19603/3286 (CRF D-2062B)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants	:	Kim et al.)	Examiner:
)	A. Kubelik
Serial No.	:	09/596,958)	
)	Art Unit:
Cnfrm. No.	:	5427)	1638
)	
Filed	:	June 20, 2000)	
)	
For	:	DNA ENCODING <i>ERWINIA</i>)	
		<i>AMYLOVORA</i> HYPERSENSITIVE)	
		RESPONSE ELICITOR AND ITS USE)	

AMENDMENT UNDER 37 C.F.R. § 1.312

Mail Stop: Issue Fee
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Alexandria, VA 22313-1450

Dear Sir:

In response to the August 12, 2005, Notice of Allowance and Issue Fee Due,
please amend the above-identified patent application as set forth hereinafter.

Amendments to the Abstract of the Disclosure begin on page 2 of this paper.

Remarks begin on page 3 of this paper.